# 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000029781

Entity Name: HEALING RIBBONS, LLC

### Current Principal Place of Business:

3051 PADDLE CREEK DRIVE JACKSONVILLE, FL 32223

## **Current Mailing Address:**

P O BOX 600835 JACKSONVILLE, FL 32260 US

# FEI Number: 20-4577490

### Name and Address of Current Registered Agent:

SILVA-FEENEY, CHERYL L 3051 PADDLE CREEK DR JACKSONVILLE, FL 32223 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

#### SIGNATURE:

Electronic Signature of Registered Agent

## Authorized Person(s) Detail :

Title	MGR
Name	SILVA-FEENEY, CHERYL L
Address	3051 PADDLE CREEK DRIVE
City-State-Zip:	JACKSONVILLE FL 32223

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHERYL SILVA-FEENEY

MEMBER

05/06/2014 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED May 06, 2014 Secretary of State CC6968658367

Certificate of Status Desired: No

Date